# FORM D

PROCESSED

SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

THOMSON REUTERS NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D

## **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

1437	455						
OMB APPR	OVAL						
OMB Number: 3235-0076							
Expires:	ļ						
Estimated average	ge burden						
hours per respon	se 16.00						

SEC US	E ONLY
	Serial
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DATE R	ECEIVED
Profix.	1

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	08047568
Stevens Forest Limited Partnership	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
312 N. Martin Luther King, Jr. Blvd., 3rd Floor, Baltimore, MD 21201	(410) 332-7400
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
	SEG
Brief Description of Business Ownership of Multifamily Rental Property	Mail Processiกฏ Gection
Type of Business Organization  corporation business trust  limited partnership, already formed other (p	ease specify):
Actual or Estimated Date of Incorporation or Organization: Month Year  Actual or Estimated Date of Incorporation or Organization: OTT OTT Actual Estim Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)  GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D of 77d(6). When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given b which it is due, on the date it was mailed by United States registered or certified mail to that address.	A notice is deemed filed with the U.S. Securities
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	49.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously supplied with the SEC.	
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for s ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the S are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim fo accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	ecurities Administrator in each state where sales the exemption, a fee in the proper amount shall
ATTENTION ———	
Failure to file notice in the appropriate states will not result in a loss of the federal examples appropriate lederal notice will not result in a loss of an available state exemption unle filing of a federal notice.	

#### A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Director ✓ General and/or Managing Partner Full Name (Last name first, if individual) EHC Stevens Forest, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 312 N. Martin Luther King, Jr. Blvd., 3rd Floor, Baltimore, MD 21201 Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) M&T Bank Affordable Housing Fund, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) 10227 Wincopin Circle, Suite 810, Columbia, MD 21044 Check Box(es) that Apply: ☐ Beneficial Owner ☐ Executive Officer Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Executive Officer Director Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					B. II	NFORMAT	ION ABOU	T OFFERI	NG			· ·	
1.	Has the	issuer sold	, or does th	ne issuer in	ntend to se	ll, to non-a	ccredited i	nvestors in	this offer	ing?		Yes	No 🗷
				Ans	wer also in	Appendix	Column 2	, if filing	under ULC	E.			^
2.	What is	the minimu	ım investm	ent that w	ill be acce	pted from a	ıny individ	ual?	***************************************			s_0.0	<del></del>
3.	Does th	e offering p	ermit join	t ownershi	p of a sing	le unit?			•••••			Yes	No <b>⊠</b>
4.	commis If a pers or state:	ne informati sion or simi on to be list s, list the na r or dealer.	lar remune ed is an ass me of the b	ration for s sociated pe roker or de	solicitation rson or age caler. If me	of purchase int of a brok ore than five	ers in conne ter or deale e (5) persor	ection with r registered is to be list	sales of sec I with the S ed are asso	curities in t EC and/or	he offering.		
Ful	l Name (	Last name f	irst, if indi	ividual)									
Bu	siness or	Residence /	Address (N	lumber and	d Street, Ci	ity, State, Z	(ip Code)						
Na	me of As	sociated Bro	oker or De	aler	<del></del>								
Sta	tes in Wi	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers		<del></del>		<del>_</del> ·	<u> </u>	
	(Check	"All States"	" or check	individual	States)			***************************************		,.,		☐ Al	l States
	AL IL MT RI	IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Fu	l) Name (	Last name i	irst, if ind	ividual)						· <del></del>	<del></del>		
Bu	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)						
Na	me of As	sociated Bro	oker or De	aler	<u></u>						<u>, , , , , , , , , , , , , , , , , , , </u>		
Sta	tes in W	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers				<del></del>		
	(Check	"All States"	" or check	individual	States)	***************		************	/!******	***************************************	***************************************	☐ Al	1 States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	DC MA ND WA	MI OH WY	GA MN OK WI	HI MS OR WY	MO PA PR
Fu	II Name (	Last name f	irst, if ind	ividual)								· <u>·</u>	
Bu	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)	<del></del> -				<del>-</del>	
Na	me of As	sociated Bro	oker or De	aler	· <u>···</u>				<u>-</u>				
Sta	tes in Wi	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers	<u> </u>					
	(Check	"All States"	" or check	individual	States)	**************			***********	***********	·····	□ Al	l States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

١.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	· ·	c
	Equity		
	Common Preferred	·	<b>J</b>
	<del>-</del> -	r	•
	Convertible Securities (including warrants)		<b>s</b>
	Partnership Interests		
	Other (Specify)		\$
	Total	\$ 0,707,104.00	\$ 0.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate Dollar Amount
		Investors	of Purchases
	Accredited Investors	1	\$ 3,767,184.00
	Non-accredited Investors		s
	Total (for filings under Rule 504 only)		s 3,767,184.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		s
	Regulation A		<b>s</b>
	Rule 504		<b>s</b>
	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s
	Printing and Engraving Costs		s
	Legal Fees		s 20,000.00
	Accounting Fees	-	s
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		s
	Other Expenses (identify)	_	\$
	Total	_	\$ 20,000.00

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	5	\$
i.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used to each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.	1	
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		
	Purchase of real estate	s	
	Purchase, rental or leasing and installation of machinery and equipment	s	_ □\$
	Construction or leasing of plant buildings and facilities		
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	_	_
	Repayment of indebtedness		
	Working capital		
	Other (specify):	_	_
			s
	Column Totals	\$ 0.00	<b>[]</b> \$_3,675,490.0
	Total Payments Listed (column totals added)	<u>\$_3</u>	,675,490:00
	D. FEDERAL SIGNATURE		
ig	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commit information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of	ssion, upon writte	
	uer (Print or Type) Signature Levens Forest Limited Partnership	Date 5/29/	/08
	me of Signer (Print or Type)  Title of Signer (Print or Type)	-/-//	
٧a	inte or organization or reper		

--- ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No <b>⊠</b>
	See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is f D (17 CFR 239.500) at such times as required by state law.	led a no	tice on Form
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, informatissuer to offerees.	ion furn	ished by the
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entimited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claim of this exemption has the burden of establishing that these conditions have been satisfied.		
	uer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its beha thorized person.  A.	If by the	undersigned

Issuer (Print or Type)	Signature Date
Stevens Forest Limited Partnership	1/1 usta / 1/200 5/29/08
Name (Print or Type)	Title (Print or Type)
Marsha Grayson	President of General Partner

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

#### **APPENDIX** 3 4 ţ 2 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach offering price Type of investor and to non-accredited explanation of investors in State offered in state amount purchased in State waiver granted) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) Number of Number of Accredited Non-Accredited Yes Investors Investors Yes State No No Amount Amount AL ΑK AZ $\mathbf{A}\mathbf{R}$ CA CO CT DE DC FL GA НΙ ID ΙL IN ĪΑ KS KY LA ME MD \$3,767,184. 0 1 X X MA Μl MN MS

#### 2 3 ì 4 Disqualification Type of security under State ULOE intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors Investors Yes No Amount Amount MO MT NE NV NH NJ NM NY NC ND ОН OK OR PA RI SCSDTN TX UT VT VAWA WV WI

**APPENDIX** 

	·			APP	ENDIX					
1	1 2 3							5 Disqualification		
	to non-a	d to sell accredited is in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY										
PR	· · · ·									

